TERMS OF REFERENCE REVIEW OF CURRENT SCHOOL-BASED SEXUAL AND REPRODUCTIVE HEALTH PROGRAMS IN LOWER AND UPPER SECONDARY SCHOOLS IN VIET NAM

1. BACKGROUND

Viet Nam currently has a very high proportion of young people. According to the Viet Nam Population Change and Family Planning Survey 2015, adolescents and youth aged 10-29 account for approximately 30% of the total population. Investing in comprehensive youth development will support Viet Nam to optimize the utilization of the young generation in the socio-economic development of the country.

The current data shows that about one third of adolescents and young people in Viet Nam still face difficulties in accessing information and services on sexual and reproductive health (SRH). Evidence shows that young people are having earlier sexual debut than before and that 7, 8%¹ of adolescents aged 15-18 have had sex before the age of 15. More importantly, about 30% of female adolescents and young adults' aged 15-24 report unmet need for modern contraceptives². It is estimated that 0.2% of females³ and 0.3% of males aged 15-24 were living with HIV in 2014⁴. Contributing factors to these issues have been identified in many studies, including lack of proper knowledge, attitude and practices (KAP) for safe sex among young people and lack of access to youth friendly sexual and reproductive health information and services⁵.

In previous years, several educational programs concerning sexual and reproductive health have been implemented in the school system for both students and teachers as results of continuous supports from UNFPA, UNESCO, UNICEF and Save the Children, among others. However, these programs are still not proven effective in schools⁶. Where the programs have been integrated into existing curriculum, the contents have been diluted causing difficulties for both teachers and students, particularly for schools that lack human and financial resources. Additionally, taking the rapid development of information technology and internet in Viet Nam into account, the traditional approach in providing these programs to adolescents and young people, should be revised.

Assessments of both global and Asian comprehensive sexuality education (CSE) programs have shown positive health outcomes for youth including reduction in sexually transmitted infections, unwanted pregnancies among adolescents and unmarried youth⁷⁸. Taking the above situation into consideration, within the framework of UNFPA's 9th country program, Ministry of Education and Training (MOET) and UNFPA will jointly conduct a review of the current school-based education program on sexuality and reproductive health in Viet Nam, in order to identify challenges in the implementation of CSE. Evidence from this review will be utilized primarily by MOET, with support

¹ MOH-UNFPA. 2016. National survey on Adolescent Sexual and Reproductive Health

² MOH-UNFPA. 2016. National survey on Adolescent Sexual and Reproductive Health

³ World Bank Statistics HIV Prevalence Female. 2015 [cited 2015 21 September]; Available from: http://data.worldbank.org/indicator/SH.HIV.1524.FE.ZS.

⁴ *World Bank Statistics HIV Prevalence Men.* 2015 [cited 2015 21 September]; Available from: http://data.worldbank.org/indicator/SH.HIV.1524.MA.ZS.

⁵ UN.2016.Viet Nam: Key facts and figures

⁶ UNFPA & The National Assembly. 2014. Parliament mission on implementation assessment of policies and legislation on adolescent and youth sexual and reproductive health, with key ministries and organizations on ASRH.

⁷ UNFPA. 2015. The Evaluation of Comprehensive Sexuality Education Programmes: A Focus on the Gender and Empowerment Outcomes.

⁸ UNESCO. 2015. Comprehensive sexuality education global review.

from UNFPA, in policy dialogues with stakeholders in the implementation and delivery of an ageappropriate, culturally accepted comprehensive sexuality education program in Viet Nam. A research team, consisting of one international consultant and one national research assistant, will be recruited to deliver this task.

2. OBJECTIVES OF THE ASSIGNMENT

The objective of this consultancy is to assess the content, implementation and delivery of the current school-based sexuality and reproductive health education programs. Particularly, the review will achieve following specific objectives:

Specific objectives:

- To identify strengths and weaknesses of the contents of the sexual and reproductive health educational programs for lower and upper secondary schools as referenced in UNESCO's International Technical Guidance on Sexuality Education (ITGSE) and UNFPA's Operational Guidelines for Comprehensive Sexuality Education.
- ii) Review the delivery of the current sexual and reproductive health educations in lower and upper secondary schools.
- iii) To assess the current enabling environment for implementation of sexual and reproductive health education programs at national, provincial and school levels.
- iv) To provide recommendations for the development and implementation of a comprehensive sexuality education in the country.

3. METHODOLOGY

This study will be based on following research methods:

- i) Review of secondary data including studies, reports and policy papers that are relevant to school-based sexual and reproductive health education programs and global and regional best practices of comprehensive sexuality education.
- ii) In-depth interviews (IDI)
- iii) Focus group discussions (FGD)
- iv) Direct observations

A framework on the regional evaluation on SRH education program that was conducted in 2014 by UNFPA, UNESCO, UNICEF and UNESCO Tool Kits for assessment of SRH education program will be adapted to the local context and be a key reference for conducting this review in Viet Nam (See Annex 1). See Annex 2 for a more detailed summary of the suggested methodology.

4. SCOPE OF WORK

The selected consultants will, in collaboration with MOET and UNFPA, produce following deliverables:

- Develop an inception report based on the format presented in Annex 3.
- Collect relevant secondary and qualitative data. Analyze data.

- Critical review secondary data.
- Analyze qualitative data.
- Draft the report.
- Present the draft report to MOET and UNFPA for comments
- Finalize the report based on the received comments.
- The international consultant and national research assistant will provide empirical including signed consents, recordings from IDIs and FGDs and field notes from site observations and secondary literature to UNFPA.

Proposed thematic areas presented in Annex 4.

5. FINAL OUTPUTS

The following products in English and Vietnamese should be submitted to UNFPA:

- An inception report submitted by 30 July 2017
- The first draft report: submitted by 30 October 2017
- The final report consisting of max. 50 pages excluding annexes: submitted by 15 December 2017.

See Annex 6 for templates of the report.

6. TIME REQUIRED AND DUTY STATION

The timeframe required for this consultancy is from **15 July 2017 to 30 March 2018**, comprising maximum 60 working days for both consultants (see Annex 7 for the proposed task division between two consultants).

Duty station: Home-based, Ha Noi and some provinces in Viet Nam.

7. INTENDED USES AND USERS

Findings and recommendations from this report can be used by MOET, with support from UNFPA, to advocate for the implementation of an age-appropriate and culturally accepted school- based comprehensive sexuality education in the national education curriculum in Viet Nam, following the UNESCO guideline.

8. EXPERTISE AND QUALIFICATIONS

The research team will consist of one international consultant and one national consultant. A proposal for the division of responsibility between the two consultants is described in Annex 7.

8.1 International consultant (Team leader)

Requirements for the international consultant:

- Holds a Master degree on education, social sciences or related disciplines.
- Has a minimum of 10 years of experience in research on the educational system and/or adolescent sexual and reproductive health education.
- Has strong quantitative and qualitative research experience.
- Masters good presentation- and communication skills and be fluent in written English.
- Have experiences in assessment of school training curricula including school-based sexual and reproductive health education.
- Has comprehensive knowledge on Viet Nam and experience from Viet Nam or other ASEAN countries, would be an advantage.
- Is familiar with UNFPA's and UNESCO's work on CSE would be an advantage.

8.2 The local research assistant

Requirements for the local research assistant:

- Holds a Bachelor degree on education, social sciences or related disciplines.
- Has a minimum of 3 years of experience in research on the educational system and/or adolescent sexual and reproductive health education.
- Masters good presentation- and communication skills and be fluent in written English and Vietnamese.
- Is familiar with UNFPA's and UNESCO's work ASRH would be an advantage.

9. ADMINISTRATIVE SUPPORT AND REFERENCES

9.1 Role of Vietnam Institute of Educational Sciences (VNIES), MOET

- Create a steering committee of experts providing input into the methodology and survey instruments.
- Coordinate with other concerned departments, including Secondary Education Department, within the Ministry to provide input in the TOR, inception report, draft report and validate the final report to ensure the MOET's ownership and user of the review results.
 - Assign one focal point to work with and facilitate the research team work.
- Provide the consultants with policy documents, guidelines, materials, reports etc. from MOET relating to the current school-based sexual and reproductive health education program in the school system.
- Facilitate the conduction of the study by supporting the research team:
 - Provide necessary logistic and administrative arrangements for the international- and national consultant.
 - Support the consultants to collect locally available reports and publications relating to school-based sexual and reproductive health education programs in Viet Nam.
 - Provide administrative support for the consultants to conduct qualitative interviews with key informants including arrangement of meetings and sending official letters to education settings.
- Coordinate with other concerned departments within the Ministry and organize consultation meetings to:
 - Provide inputs for the inception report and research tools/guideline for study.
 - Provide inputs for drafts of the report
 - Validate the final report to ensure the MOET's ownership and user of the review results
- Disseminate the report's findings and recommendations for the implementation of an ageappropriate and culturally accepted school- based comprehensive sexuality education in the national education curriculum in Vietnam, following the UNESCO guideline.

9.2 UNFPA

- Cooperate, discuss and share the TOR draft, detailed plan for the review and report preparation with **Vietnam Institute of Educational Sciences**, MOET for input.
- Recruit the international consultant and national research assistant
- Facilitate the report development process.
 - Provide administrative and financial resources for the review and report preparation.
 - Provide necessary background documents related to the school-based sexual and reproductive health education, supported by UNFPA and other UNs, DPs in Viet Nam, and UNESCO/UNFPA guidelines.
- Monitor the progress and quality of consultancy services and timely provide comments for the consultant's work.

- Provide comments for:
 - Inception report, tools and guidelines for review.
 - The draft of the report.
 - The final report.

9.3 References

- Background documents related to the school-based sexual and reproductive health education program, supported by UNFPA and other UNs, DPs in Viet Nam will be provided for selected consultants.
- Research framework of the Regional evaluation on CSE that was conducted in 2014 by UNFPA, UNESCO and UNICEF.
- UNESCO and UNFPA Tool Kits to review sexual and reproductive health education program: SERAT.

10. CONTRACT MODALITIES AND PAYMENT TERMS

10.1 Contract modality

UNFPA will sign an Individual Consultant Contract (ICC) with each of the selected consultants. The ICC will cover all costs related to the implementation of the consultancy service.

- Total working time for the consultancy is a maximum of 30 working days for respectively the international- and the national consultant. A consultancy rate will be applied based on the qualifications and experiences of each consultant.
- In case the consultant has to travel for data collection⁹, DSA will be paid using the UN standards and guidelines.
- Payment will be made in two instalments to both consultants as follows:

10.2 Payment

International consultant

- **The first instalment:** the contract value equivalents to 15 working days and travel costs for data collection will be transferred to the contractor upon receipt of draft inception report and completion of field data collection.
- **The final instalment:** The remaining contract value equivalents to 15 working days will be disbursed to the contractor after having the final report submitted by the consultant and certified by UNFPA National Program Officer (s).

Local consultant

- **The first instalment:** the contract value equivalents to 15 working days and travel costs for data collection will be transferred to the contractor upon receipt of draft inception report and completion of field data collection.
- **The final instalment:** The remaining contract value equivalents to 15 working days will be disbursed to the contractor after having the final report submitted by the consultant and certified by UNFPA National Program Officer(s)

⁹ UNFPA will cover all the costs for administration of the mail rapid assessment (if required)

ANNEXES

ANNEX 1: REFERENCE TOOLS

- Regional framework for assessment of CSE 2014 in the selected countries in the ASIA regions.
- UNESCO and UNFPA Tools for review of CSE: SERAT. <u>http://hivhealthclearinghouse.unesco.org/library/documents/sexuality-education-review-and-assessment-tool-serat-0</u>
- UNFPA Operational Guidance for Comprehensive Sexuality Education: A Focus on Human Rights and Gender (2014) <u>http://www.unfpa.org/publications/unfpa-operational-guidance-comprehensive-sexuality-education</u>
- UNESCO: It should be (as this pdf version includes Vol. 1 and Vol. 2) UNESCO, UNAIDS, UNFPA, UNICEF and WHO, International Technical Guidance on Sexuality Education: An Evidence-Informed Approach for Schools, Teachers and Health Educators (2009) <u>http://unesdoc.unesco.org/images/0018/001832/183281e.pdf</u>
- International working group of NGOs: IT'S ALL ONE CURRICULLUM- VOLUME 1: GUIDELINES FOR A UNIFIED APPROACH TO SEXUALITY, GENDER, HIV, AND HUMAN RIGHTS EDUCATION (2009) https://www.popcouncil.org/uploads/pdfs/2011PGY_ItsAllOneGuidelines_en.pdf
- International working group of NGOs: IT'S ALL ONE VOLUME 2: GUIDELINES FOR A UNIFIED APPROACH TO SEXUALITY, GENDER, HIV, AND HUMAN RIGHTS EDUCATION (2009)
 https://www.pepgeupgil.org/uploads/pdfs/2011PGX_ltsAllOpsActivities_on.pdf

https://www.popcouncil.org/uploads/pdfs/2011PGY_ItsAllOneActivities_en.pdf

ANNEX 2: SUGGESTED METHODS FOR THE SURVEY

1. Location of the assessment:

The assessment will be conducted at the central level and in selected secondary schools in three provinces (north, south and central of Vietnam) covering urban/rural settings. The selected provinces should reflect different social-economic environments.

2. Target sample of the assessment:

2.1 Review of secondary data:

Conduct a background literature review including the content of the current school-based SRH education programs including curriculum and teaching materials, international and national papers and policy documents relevant to sexual and reproductive health education.

2.2 Qualitative research (14 IDIs and 13 FGDs)

The qualitative data will consist of both in-depth interviews (IDIs), focus group discussions (FDGs) and direct observations. The in-depth interviews should last a maximum of 45 minutes each. The focus group discussion should be a maximum of 1-1½ hour each and should be semi-structured with themes or questions for discussion presented by the interviewer. The following proposed method can be adapted to the future research questions to reach the study objectives.

Central/provincial level (14 IDIs and 19 FGD)

Categories	In-dep	th interviews	Focus group discuss	ion Direct
	(IDI)		(FGD)	observation
Central level 1. Ministry of Education and Training (MOET) 2. Ministry of Health (MOH) 3. The National Assembly (Youth Committee) 4. CSO 5. UNESCO 6. Vietnam National Institute for Educational Science (VNIES) and The Renovation of Text Book and Curriculum	1. 2. 3. 4. 5.	Three people from MOET (03 IDIs) One person from MOH (01 IDI) One person from The National Assembly (01 IDI) Two people from two different CSOs (02 IDIs) One person from UNESCO (01 IDI)	 6. Six people fr the curricul development team of Vietnam National Instit for Educatio Science and T Renovation Text Book a Curriculum Board (VNII (01 FGD) 	um the ute nal The of and
Board Provi-ial level 1. Department of Education and Training (DOET) 2. Principals 3. Teachers 4. Students 5. Parents 6. Classroom	2.	Three people from DOET (03 IDIs) One principal from each province (03IDIs)	each provin with 06 teachers who teaching sex and reproduct health rela subjects and w are conduct extra-curricula activities SRH (06 FGD 4. Two FGDs each provin one in lower a one in up secondary sch including students in ea (06 FGDs) 5. Two FGDs each provin with 6-8 pare (06 FGDs)	-08sessionsare(02ualobservatiiveons)ted/hoing//ho<
Total	14 IDI	s	19 FGDs	02 Direct
				observations

All IDIs and FDGs should be planned and conducted in respect of gender balance implying an equal distribution of males and females. Additionally, the participants from both rural and urban areas should be represented.

3. Assessment tools:

Refer to and adapt from Regional framework for assessment of CSE 2014 in the selected countries in the ASIA regions, UNESCO- and UNFPA guidelines for CSE.

ANNEX 3: OUTLINE OF THE INCEPTION REPORT

In reference to the requirements stated in respectively this Terms of Reference and the Regional Framework mentioned in Annex 1, it is required that the researchers prepare an inception report which includes the following:

- A brief introduction to the background of the situation of the school –based sexual and reproductive health related education programs in Vietnam.
- Research objectives based on the TOR.
- Clearly formulated and answerable research questions.
- Detailed research methods, providing:
 - Study design
 - Participant recruitment
 - Data management and data analysis plan
 - Categories of main key findings
 - A risk management plan that presents a clear strategy to cope with possible difficulties in data collection and analysis
- The plan for the study conduction including the following details:
 - Specific timelines with a detailed travel plan for field work and data collection
 - Clear task division between consultants (See Annex 7 for the proposed task division between two consultants).
 - Study protocol and data collection instruments including interview guides specific for each group of key informants and focus groups discussion manuals and a template for the informed consent and assent for participants.
 - A risk management plan that presents a clear strategy to cope with possible difficulties when identifying and interviewing respondents.

A detailed data collection plan together with the revised data collection tools will be submitted to UNFPA for approval before the commencement of data collection.

The inception report should be developed in both English and Vietnamese.

ANNEX 4: SUGGESTED THEMATIC AREAS FOR ASSESSMENT

Below is listed some overall core thematic areas from UNFPAs guidelines for comprehensive sexuality education which are consistent within similar guidelines developed by respectively UNESCO and International working group of NGOs (Annex 1).

Nine Essential Components of CSE¹⁰

- 1. A basis in the core universal values of human rights.
- 2. An integrated focus on gender.
- 3. Thorough and **scientifically** accurate information.
- 4. A safe and healthy learning environment.
- 5. **Linking** to sexual and reproductive health services and **other initiatives** that address gender, equality, empowerment, and access to education, social and economic assets for young people.
- 6. The **capacity** of the teachers.
- 7. Participatory **teaching methods** for personalization of information and strengthened skills in communication, decision-making and critical thinking.
- 8. Strengthening youth advocacy and civic engagement.
- 9. Cultural relevance in tackling human rights violations and gender inequality.
- 10. Reaching across formal and informal sectors and across age groupings.

Additionally, UNFPA guidelines provide a "CSE situation assessment tool"¹¹. This tool sets out sample items that can assist with the development of a CSE situation assessment for both the review of the secondary data and the collection of the qualitative data.

¹⁰ UNFPA Operational Guidance for Comprehensive Sexuality Education: A Focus on Human Rights and Gender (2014). Page 10. http://www.unfpa.org/publications/unfpa-operational-guidance-comprehensive-sexuality-education

¹¹ UNFPA Operational Guidance for Comprehensive Sexuality Education: A Focus on Human Rights and Gender (2014). Page 27-28. <u>http://www.unfpa.org/publications/unfpa-operational-guidance-comprehensive-sexuality-education</u>

ANNEX 5: ETHICAL CODE OF CONDUCT

Based on the Regional Framework for assessment of CSE 2014;

- All informants participating in an interview or a focus group discussion should receive and sign an informed consent.
- Informants below 18 years should receive an 'assent' instead of a 'consent'.

ANNEX 6: PROPOSED FORMAT OF THE REPORT

Executive summary

Abbreviation

Preface

Acknowledgement

Chapter 1: Introduction and country context;

- Chapter 2: Research methods
- Chapter 3: Findings
- **Chapter 4: Discussions**
- Chapter 5: Recommendations and conclusions
- References (using Vancouver referencing system)

ANNEX 7: TASK DIVISION FOR THE INTERNATIONAL CONSULTANT AND RESEARCH ASSISTANTS INCLUDING NUMBER OF WORKING DAYS

Tasks	International consultant	National research assistant*
1. Development of the inception report	5	5
Literature review of global- and country level documents	3	3
and policy papers that are relevant to school-based sexual		
and reproductive health education programs		
Development of inception report	2	2
2. Collect relevant data, analyze data and draft the	19	19
report for comments and feedback		
Collect the secondary data	2	2
Collect primary data	9	9
Analysis	4	4
Report writing	4	4
3. Present the draft report to MOET and UNFPA for comments and feedback	1	1
1 st draft report		
Final report		
4. Finalize the English and Vietnamese report based on the received comments	5	5
Total number of workdays	30	30

*The local research assistant will be responsible for the translation from Vietnamese to English and reverse and work closely with the international consultant in fieldwork.